

UNITED STATES DISTRICT COURT
DISTRICT OF DELAWARE

05-741

Delbert Duane Sampson

Plaintiff

v.

Defendant(s)

APPLICATION TO PROCEED
WITHOUT PREPAYMENT OF
FEES AND AFFIDAVITCASE NUMBER: UK 01-05-0391I, Delbert Duane Sampson declare that I am the (check appropriate box)

• • Petitioner/Plaintiff/Movant • • Other

in the above-entitled proceeding; that in support of my request to proceed without prepayment of fees or costs under 28 USC §1915, I declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief sought in the complaint/petition/motion.

In support of this application, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated? • Yes • • No (If "No" go to Question 2) DISTRICT COURT
DISTRICT OF DELAWAREIf "YES" state the place of your incarceration D.O.C. Smyrna 1181 Paddock Rd 19977Inmate Identification Number (Required): 20420Are you employed at the institution? NO Do you receive any payment from the institution? _____Attach a ledger sheet from the institution of your incarceration showing at least the past six months' transactions2. Are you currently employed? • • Yes • No

a. If the answer is "YES" state the amount of your take-home salary or wages and pay period a and give the name and address of your employer.

b. If the answer is "NO" state the date of your last employment, the amount of your take-home salary or wages and pay period and the name and address of your last employer. 1/14

3. In the past 12 twelve months have you received any money from any of the following sources?

a. Business, profession or other self-employment	• • Yes	• <u>No</u>
b. Rent payments, interest or dividends	• • Yes	• <u>No</u>
c. Pensions, annuities or life insurance payments	• • Yes	• <u>No</u>
d. Disability or workers compensation payments	• • Yes	• • <u>No</u>
e. Gifts or inheritances	• • Yes	• • <u>No</u>
f. Any other sources	• • Yes	• • <u>No</u>

If the answer to any of the above is "YES" describe each source of money and state the amount received AND what you expect you will continue to receive.

4. Do you have any cash or checking or savings accounts? • Yes No

If "Yes" state the total amount \$ _____

5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or other valuable property? • Yes No

If "Yes" describe the property and state its value.

6. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support, OR state *NONE* if applicable.

N/A ; self

I declare under penalty of perjury that the above information is true and correct.

10-19-2005

DATE

Delellis Duane Sampson

SIGNATURE OF APPLICANT

NOTE TO PRISONER: A Prisoner seeking to proceed without prepayment of fees shall submit an affidavit stating all assets. In addition, a prisoner must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

DELAWARE CORRECTIONAL CENTER
INMATE REQUEST FOR CERTIFIED TRUST FUND
ACCOUNT STATEMENT OF PRIOR SIX MONTH PERIOD

TO: Mr. Joseph Hudson, Manager
Delaware Correctional Center
Smyrna, Delaware 19977

DATE: 10-19-05

FROM: Delbert Duane Sampson
Inmate Name (Please print Name)

204291
SBI#

- I HEREBY CERTIFY -

Pursuant to the Prison Litigation Reform Act, 28 U.S.C. 1915 (a)(2), effective April 26, 1996, I am requesting a certified Statement of my Institution Trust Fund Account for the previous six month period. Please forward same to me.

Delbert D. Sampson
Signature
(28 U.S.C. 1746 and 18 U.S.C. 1621)